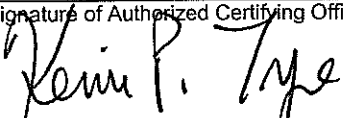


FINANCIAL STATUS REPORT
(Short Form)
(Follow instructions on the back)

ORIGINAL

1. Federal Agency and Organizational Element to Which Report is Submitted Election Assistance Commission		2. Federal Grant or Other Identifying Number Assigned by Federal Agency 39.011-HAVA Title I, section 101		OMB Approval No. 39.011	Page 1 of 1 Pages
3. Recipient Organization (Name and complete address, including ZIP code) Arizona Office of the Secretary of State, 1700 W. Washington, 7th Floor, Phoenix, Arizona 85007					
4. Employer Identification Number <div style="background-color: black; width: 150px; height: 1.2em; margin-top: 5px;"></div>		5. Recipient Account Number or <div style="background-color: black; width: 150px; height: 1.2em; margin-top: 5px;"></div>		6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Basis <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual
8. Funding/Grant Period (See Instructions) From: (Month, Day, Year) 4/28/2003		To: (Month, Day, Year)		9. Period Covered by this Report From: Month, Day, Year 1/1/2005	
10. Transactions:		I Previously Reported	II This Period	III Cumulative	
a. Total outlays		2,095,599.71	0.00	2,095,599.71	
b. Recipient share of outlays					
c. Federal share of outlays		2,095,599.71	0.00	2,095,599.71	
d. Total unliquidated obligations				0.00	
e. Recipient share of unliquidated obligations				0.00	
f. Federal share of unliquidated obligations				0.00	
g. Total federal share (sum of lines c and f)				2,095,599.71	
h. Total federal funds authorized for this funding period				5,632,647.12	
i. Unobligated balance of federal funds (Line h minus line g)				3,537,047.41	
11. Indirect Expense	a. Type of Rate (Place "X" in appropriate box) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed				
	b. Rate	c. Base	d. Total Amount	e. Federal Share	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. 10h., column III, includes \$80,626.37 for interest earned during the reporting period.					
13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.					
Typed or Printed Name and Title Kevin P. Tyne, Assistant Secretary of State			Telephone (area code, number and extension) (602) 542-4919		
Signature of Authorized Certifying Official 			Date Report Submitted 2/17/06		